

CLEAR WATER RESEARCH

231 W 67th Ct. Loveland, CO 80538

Phone: (970) 510-7125

For the next two weeks, we will be conducting water tests for the residents of this district. So there will be no inconvenience to you, please follow the instructions below:

1. **FILL** the enclosed water sample with tap water, if softening, please take the sample from the softened tap.
2. **COMPLETE** and **SIGN** the form below. (Signature required for results)
3. **PLACE** bottle and form back into plastic bag.
4. **HANG** bag back where you found it by **9:00 AM tomorrow**.

If you do not want your FREE WATER TEST we would appreciate it if you would please hang the EMPTY bottle and flyer (in plastic bag) back out for pickup: the bottle can be used at another residence.

- 1 Date sample taken _____
- 2 What source of water do you have?
☐ City ☐ Community well
☐ Private well
- 3 Please check any conditions you experience.
☐ Chlorine smell/taste ☐ Salty taste
☐ Rust stains ☐ Rotten egg smell
☐ Blue Green Stains ☐ Other _____
- 4 When was the last time you had your water tested?
☐ Never ☐ Year Tested
- 5 Do you currently use any type of water filtration?
☐ Yes ☐ No
If Yes: ☐ Whole House ☐ Drinking Water
- 6 Do you buy bottled water?
☐ Yes ☐ No
- 7 To estimate water use, how many people reside in your household?
☐ Adults ☐ Children ☐ Pets
- 8 How would you rate your water?
☐ Excellent ☐ Good
☐ Fair ☐ Poor
- 9 Do you OWN or RENT your home?
☐ OWN ☐ RENT
- 10 Is there anything you would change about your water?

11 Residents Name: _____

Address: _____

City: _____ Zip: _____

If anything concerning is found, please contact me at:

(_____) _____

Signature: _____ Date: _____

Place this form and water sample back into the plastic bag and hang it out for pick-up tomorrow

**THERE IS NO CHARGE TO RESIDENT. NOT AFFILIATED WITH
CITY WATER, COUNTY HEALTH DEPARTMENTS,
OR FRACKING AGENCIES.**

May result in participation in a Water Awareness Program